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PRACTICAL SUGGESTIONS



DRY mustard rubbed on the hands removes the odor of pus and feces.

E. C.

A SMALL rubber powder-blower, such as is used by ear specialists, is convenient to use in giving enemata to infants.

E. C.

HALF an egg beaten up with a glass of malted milk improves the flavor and adds to it nutritious value. Cocoa and chocolate are also pleasant additions to malted milk.

E. C.

I HAVE just been reading the article on Special Feeding in the September JOURNAL. I notice it says that cardiac patients are allowed weak tea and coffee. At Nauheim they cut out coffee altogether unless the patient makes a fuss about it.

M. D. B.

IF possible to move a patient from a double bed to a single or three-quarter one of enamelled iron, do it as soon as you have established yourself. A little tact will convince all concerned of the greater comfort for the patient, and you will not be opposed. If possible, put a hard mattress under the one on which the patient lies.

M. R. H.

LAST winter I had a case on the second floor of a house with a basement kitchen. The diet was liquid, every two hours, usually served cold in very small quantities. To avoid travelling over two flights of stairs, I used a tin cracker box, long and narrow, fitting nicely on the window ledge, against the double window, for an ice box, usually filling it night and morning. I kept glass jars (pint)

with screw tops, filled with the two or three liquids in use. This was in the sitting-room opening off the sick room. A clean white towel was laid over all, and no one suspected my supply closet.

M. R. H.

QUESTIONS AND ANSWERS

A HOSPITAL superintendent writes: "The one thing that troubles me in connection with nurses in private duty is, How shall we arrange for the hospital when graduate nurses are on special duty there? Shall hospitals charge a board fee when a graduate is employed? If so, who will pay it? Often a patient is willing to use a student at fifteen dollars a week instead of a graduate at twenty-five. If at a hotel, the patient would have to pay the board and the salary. Yet in a hospital the nurse gets professional relief, all the sterilizing of supplies is done for her, dressings made, etc., then should she be willing to pay her own board? What is the arrangement usually made? I have tried not to antagonize the private nurses in any way, yet it is discouraging they require so much waiting upon, want to see all operations that are unusual, and many of them upset the floor they are on dreadfully."



TREATMENT OF INGROWING NAIL.—The *Medical Record*, in an abstract from *Journal de Médecine de Paris*, says: "Drucbert, in his hints on the prophylactic treatment of this affection, states that thick and very convex nails have a natural tendency to penetrate the flesh. Flat, small nails covering large fleshy toes, when the tissues are not very resistant, are apt to be overgrown by the skin. He advises saline baths, as well as alum and tannin, for tender tissues. The greatest care in the toilet of the feet should be taken in cases showing a predisposition to ingrowing nail. Inflammation should be carefully watched for and kept in check. Curative treatment depends upon the degree of inflammation. Long walks and standing on the feet should be avoided. The application of antiseptics, such as sublimate, which will reduce the inflammation and prevent further trouble, is indicated. Dressings repeated several times daily will help to keep the trouble in check. A bit of dressing covered with vaselin may be gently forced under the nail. In more severe cases radical treatment is in order."